

|   |      |                          |                         |               |
|---|------|--------------------------|-------------------------|---------------|
| Effective on 12/08/2004.<br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). |      | <b>Complete if Known</b> |                         |               |
| <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2009</h3>                 |      | Application Number       | 10/551,150-Conf. #3977  |               |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27           |      | Filing Date              | November 17, 2006       |               |
|   |      | First Named Inventor     | Nicole Dominique HUSSEY |               |
|   |      | Examiner Name            | S. Chunduru             |               |
|   |      | Art Unit                 | 1637                    |               |
| TOTAL AMOUNT OF PAYMENT   | (\$) | 91.00                    | Attorney Docket No.     | 0641-0273PUS1 |

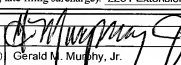
  

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|--|---|
| <b>METHOD OF PAYMENT</b> (check all that apply)  |   |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ | <input checked="" type="checkbox"/> Deposit Account                    Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolosch &amp; Birch, LLP</u> |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)   |   |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below<br><input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17    | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee<br><input checked="" type="checkbox"/> Credit any overpayments                                    |

|   |                    |   |                    |   |                         |  |  |
|---|--------------------|---|--------------------|---|-------------------------|--|--|
| <b>FEE CALCULATION</b>  |                    |   |                    |   |                         |  |  |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                    |   |                    |   |                         |  |  |
|   | <b>FILING FEES</b> |   | <b>SEARCH FEES</b> |   | <b>EXAMINATION FEES</b> |  |  |
|   |                    | Small Entity  |                    | Small Entity  |                         | Small Entity   |  |
| <b>Application Type</b>   | <b>Fee (\$)</b>    | <b>Fee (\$)</b>   | <b>Fee (\$)</b>    | <b>Fee (\$)</b>   | <b>Fee (\$)</b>         | <b>Fee (\$)</b>  | <b>Fees Paid (\$)</b>                                  |
| Utility   | 330                | 165   | 540                | 270   | 220                     | 110  |  |
| Design  | 220                | 110   | 100                | 50  | 140                     | 70   |  |
| Plant   | 220                | 110   | 330                | 165   | 170                     | 85   |  |
| Reissue   | 330                | 165   | 540                | 270   | 650                     | 325  |  |
| Provisional   | 220                | 110   | 0                  | 0   | 0                       | 0  |  |
|   |                    |   |                    |   |                         |  | <b>Small Entity</b><br><b>Fee (\$)</b> <b>Fee (\$)</b> |
| <b>2. EXCESS CLAIM FEES</b>   |                    |   |                    |   |                         |  |  |
| <b>Fee Description</b>  |                    |   |                    |   |                         |  |  |
| Each claim over 20 (including Reissues)   |                    |   |                    |   |                         |  | 52    26   |
| Each independent claim over 3 (including Reissues)  |                    |   |                    |   |                         |  | 220    110   |
| Multiple dependent claims   |                    |   |                    |   |                         |  | 390    195   |
| <b>Total Claims</b><br>9 - or 23 = _____ x _____ = _____  |                    | <b>Extra Claims</b><br>_____ x _____ = _____                                    |                    | <b>Fee (\$)</b><br>_____                                  |                         | <b>Fee Paid (\$)</b><br>_____                          |  |
| <b>Indep. Claims</b><br>1 - or 3 = _____ x _____ = _____  |                    | <b>Extra Claims</b><br>_____ x _____ = _____                                    |                    | <b>Fee (\$)</b><br>_____                                  |                         | <b>Fee Paid (\$)</b><br>_____                          |  |
| HP = Highest number of total claims paid for, if greater than 20.<br>HP = Highest number of independent claims paid for, if greater than 3.   |                    |   |                    |   |                         |  |  |
| <b>3. APPLICATION SIZE FEE</b>  |                    |   |                    |   |                         |  |  |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                    |   |                    |   |                         |  |  |
| Total Sheets<br>_____ - 100 = _____   |                    | Extra Sheets<br>_____ / 50 = _____ (round up to a whole number) x _____ = _____ |                    | Number of each additional 50 or fraction thereof<br>_____ |                         | <b>Fee (\$)</b> <b>Fee Paid (\$)</b><br>_____    _____ |  |
| <b>4. OTHER FEE(S)</b>  |                    |   |                    |   |                         |  |  |
| Non-English Specification, \$130 fee (no small entity discount)   |                    |   |                    |   |                         |  |  |
| Other (e.g., late filing surcharge): 2251 Extension for response within first month   |                    |   |                    |   |                         |  | 65.00  |

|  |  |                         |  |                  |  |
|--|--|-------------------------|--|------------------|--|
| <b>SUBMITTED BY</b>  |  | <b>Registration No.</b> |  | <b>Telephone</b> |  |
| Signature:  |  | 28,977                  |  | (703) 205-8000   |  |
| Name (Print/Type): Gerald M. Murphy, Jr.   |  | (Attorney/Agent)        |  | Date:            |  |

JUL 20 2009